U.S. Department of Justice Document 1628 United States Marshals Service Document 1628 Figure 1628 See Instructions for "Service on the reverse of this form."

on the reverse of this form.

	SOFT
of Process by the U.S.	41076 (7842)(2)
of Process by the U.S.	Marshal"
	<u> </u>

PLAINTIFF	COURT CASE AND AND	ED .	
United States of America	08-CR-240	OURT CASE NUMBER	
DEFENDANT	TYPE OF PROCESS		
John Capolino		Order of Forfeiture	
SERVE NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE			
United States Marshals Service -EDNY			
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)			
AT 225 Cadman Plaza, Brooklyn, New York 11201			
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW			
	Number of process to be		
LORETTA E. LYNCH, United States Attorney	<u> </u>		
Eastern District of New York	Number of parties to be		
271 Cadman Plaza East, Seventh Floor Brooklyn, New York 11201	served in this case		
Attn: AUSA Claire Kedeshian	Check for service		
	on U.S.A.		
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDIT	ING SERVICE (Include Business and A	Alternate Addresses, All	
Telephone Numbers, and Estimated Times Available For Service):		Fold	
Please transfer these assets into the Asset Forfeiture Fund:			
12-FBI-002927 (JP Morgan Cashier's Check # 1734005146 for \$400.00) (JP Morgan Cashier's Check # 1734005276 for \$370.00)			
(JP Morgan Cashier's Check # 9792704184 for \$12,500.00)			
· · ·			
Signature of Attorney or other Originator requesting service on behalf of:	TELEPHONE NUMBER	DATE	
Claire Kedeshian DEFENDA		8/10//2012	
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY—1		W THIS LINE	
	uthorized USMS Deputy or Ark	Date	
number of process indicated. (Sign only first USM 285 if more) Of Origin Of Origin			
than one USM 285 is submitted) No. No.	Share Silver	0/1910	
I hereby certify and return that I \(\subseteq \text{have personally served, } \subseteq \text{have legal evidence of service, } \subseteq \text{have}			
on the individual, company, corporation, etc., at the address shown above or on the individual, com-	pany, corporation, etc., shown at the add	ress inserted below.	
☐ I hereby certify and return that I am unable to locate the individual, company, corporation	, etc., named above (See remarks belo	ow)	
Name and title of individual served (if not shown above)	A person of s	uitable age and dis-	
	cretion then re usual place of	siding in the defendant's fabode.	
Address (complete only if different than shown above)		Time 1 - an	
•	10/0/12		
	NSTIDIE	рпр	
	Signature of U.S.	Marshal or Deputy	
	Mucakael	Ly FY	
Service Fee Total Mileage Charges Forwarding Fee Total Charges Advance Deposits (including endeavors)	Amount owed to U.S. Marshal or	Amount of Refund	
REMARKS: () 10 02/2 0	dust bulant	ise Leed	
REMARKS: \$ 1327000 departed cuto Asset perfective feed Occit on 8/10/12			
To and on shorter	U	_	
acción onen			